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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

| Application Number | 09/662,006 | | | | |
|------------------------|----------------------------|--|--|--|--|
| Filing Date | September 14, 2000 | | | | |
| First Named Inventor | Patrick K. Sullivan et al. | | | | |
| Art Unit | 3736 | | | | |
| Examiner Name | Patricia Mallari | | | | |
| Attorney Docket Number | HOANA-65047 | | | | |

| ENCLOSURES (check all that apply) | | | | | |
|--|---|--|--|--|--|
| Fee Transmittal Form | Drawing(s) | After Allowance communication to Technology Center (TC) | | | |
| Fee Attached | Licensing-related Papers | Appeal Communication to Board of Appeals and Interferences | | | |
| Améndmént / Reply | Petition | Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) | | | |
| After Final | Petition to Convert a Provisional Application | Proprietary Information | | | |
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| Certified Copy of Priority Document(s) Response to Missing Parts/ | Remarks | | | | |
| Incomplete Application | | | | | |
| Response to Missing Parts under 37 CFR 1.52 or 1.53 | | | | | |
| SIGNATU | RE OF APPLICANT, ATTORNEY, OR AGEN | Ţ | | | |
| | N LEE & UTECHT, LLP | | | | |
| or Individual name Craig B. Bailey | | | | | |
| Signature Signature | | | | | |
| Date January 26, 2005 |] | | | | |
| | | | | | |

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| Fees pursuant to the Consultation of the Proprietors Act, 2005 (H.R. 4818). | | Complete if Known | | | |
|---|--------------------|----------------------|----------------------------|---|--|
| | · · · | Application Number | 09/662,006 | | |
| FEE TRANSI | WIIIAL | Filing Date | September 14, 2000 | | |
| for FY 200 |)5 | First Named Inventor | Patrick K. Sullivan et al. | | |
| | | Examiner Name | Patricia Mallari | _ | |
| Applicant claims small entity statu | s. See 37 CFR 1.27 | Art Unit | 3736 | | |
| TOTAL AMOUNT OF PAYMENT | (\$) \$510.00 | Attorney Docket No. | HOANA-65047 | | |
| METHOD OF DAVMENT (shook of | I that apply) | | | | |

| METHOD OF PAYMEN | T (check all t | hat apply) | | | | | |
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| Deposit Depo | osit Deposit Account Number: <u>06-2425</u> Deposit Account Name: <u>Fulwider Patto</u> | | | | | der Patton | |
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| | | ee(s) or any und | erpayment of | Credit a | ny overpayment | s · | |
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| FEE CALCULATION | 1 011 P 1 O - 2030 |). | | *** | | | |
| | | | | | | | - |
| 1. BASIC FILING, SEARC | • | | | | | | |
| | FILING F | =೬Տ Small Entity | SEARCH | | EXAMINA | TION FEES | |
| Application Type | Fee (\$) | Fee (\$) | Fee (\$) | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | Fees Paid(\$) |
| Utility | 300 | 150 | 500 | 250 | 200 | 100 | 1 000 1 414(4) |
| Design | 200 | 100 | 100 | 50 | 130 | 65 | |
| Plant | 200 | 100 | 300 | 150 | 160 | 80 | |
| | | | | | | | |
| Reissue | 300 | 150 | 500 | 250 | 600 | 300 | |
| Provisional | 200 | 100 | 0 | 0 | 0 | 0 | |
| 2. EXCESS CLAIM FEES | | | | | | | Small Entity |
| Fee Description | | | | | | Fee (\$) | Fee (\$) |
| Each claim over 20 (included | • | • | | | | 50 | 25 |
| Each independent claim ov | er 3 (includ | ng Reissues) | | | | 200 | 100 |
| Multiple dependent claims | | | | | | 360 | 180 |
| | | | _ | | | | ependent Claims |
| Total Claims | Extra Claims | | - | ee Paid (\$) | | <u>Fee (\$)</u> | Fee Paid (\$) |
| - 20 or HP = HP = highest number of total cl | 0 aims paid for, | | <u>25.00 </u> | \$0.00_ | | | ` |
| Indep. Claims 8 - 3 or HP = | Extra Claims | Fee (\$) | | ee Paid (\$) \$0.00 | | | |
| HP = highest number of indepe | ndent claims p | | | 50.00 | | | |
| 3. APPLICATION SIZE FE If the specification and draw 37 CFR 1.52(e)), the applic See 35 U.S.C. 41(a)(1)(G) | wings excee cation size fe | e due is \$250 | of paper (exc (\$125 for sn | luding electronic nall entity) for ea | cally filed sequach additional | ience or compi 50 sheets or fr | uter listing under action thereof. |
| Total Sheets | Extra Shee | | umber of each | additional 50 or | fraction thereof | Fee (\$) | Fee Paid (\$) |
| - 100 = | | / 50 | | (round up to | a whole | x <u>\$125.00</u> | = |
| 4. OTHER FEE(S) | | | | | | | Fee Paid (\$) |
| Non-English specification, | | no small entit | | | | | |
| Other (e.g. late filing surch | arge): Thre | e-Month Exter | ision | | | | \$510.00 |

| SUBMITTED BY | | | | | | |
|-------------------|-------|------------|-----------------------------------|--------|-----------|------------------|
| Signature | 1.0.1 | | Registration No. (Attorney/Agent) | 28,786 | Telephone | (310) 824-555 |
| Name (Print/Type) | | Craig B. I | Bailey | | Date | January 26, 2005 |

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